

Types of Operations for morbid obesity;

I. Gastric restrictive procedures

*Lap. Vertical banded gastroplasty.

*Lap. Adjustable gastric Banding

II. Malabsorptive Procedure

*Biliopancreatic diversion + duodenal switch,
jejuno-ileal Bypass

III. mixed procedure

*R – Y Gastrojejunostomy

LAPAROSCOPIC

BARIATRIC SURGERY

Medical shop

At

shoppingdealer.com

dratef.net

Adjustable Gastric Banding

- It is the least invasive surgical treatment of morbid obesity.
- Described in 1993 by *Catona* .
- It is purely restrictive procedure.
- In Europe, it is the bariatric procedure of choice.
- In U.S.A., FDA approval since June 2001.

-Techniques

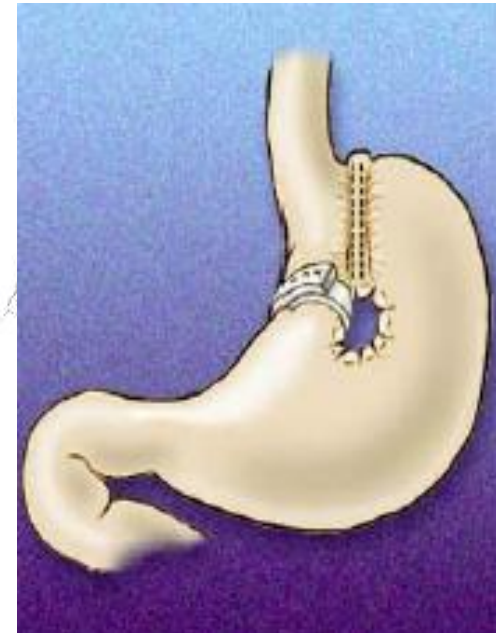
Adjustable gastric banding involves placing a gastric band around the exterior of the stomach.



The band is attached to a reservoir that is implanted subcutaneously in the rectus sheath. Injecting the reservoir with saline alters the diameter of the gastric band; therefore, the rate limiting stoma in the stomach can be

Laparoscopic Vertical Banded Gastroplasty (VBG)

In this procedure the stomach is segmented along its vertical axis. To create a durable reinforced and rate-limiting stoma at the distal end of the pouch, a plug of stomach is removed and a propylene collar is placed through this hole and then stapled to itself. Because the normal flow of food is preserved, metabolic complications are rare





Passing of the guide via the window from right to left



Putting the free end of the band on the guide

progressively narrowed to induce greater weight loss, or expanded if complications develop.



Making a window in hepatogastric ligament by harmonic sca



Continues



Engagement of the two ends of the band anteriorly



Pulling the guide with the band from left to right behind the upper stomach

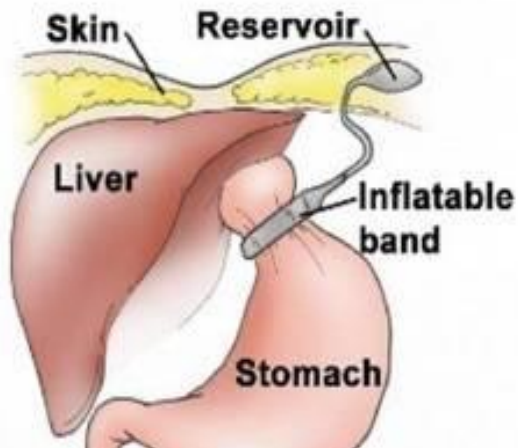


Continues

Wrapping is in continuous



Taking the reservoir of the band to sub rectal space



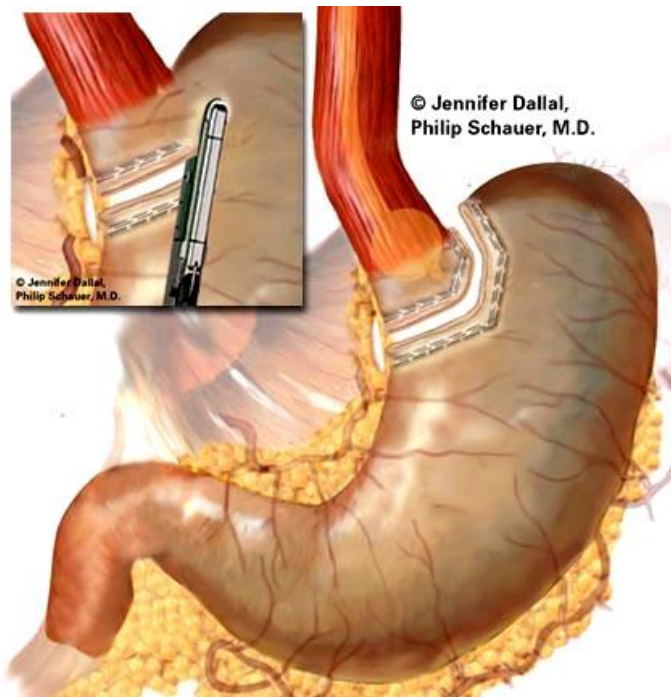
Lap band locked in place



Approximation and suturing of the gastric fundus anterior to the band

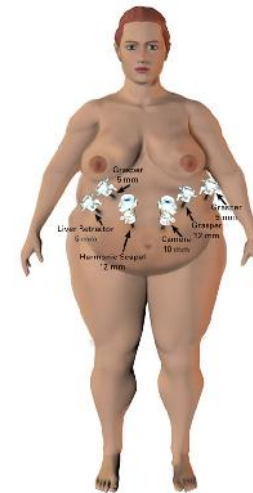


Taking the reservoir of the band to sub rectal space

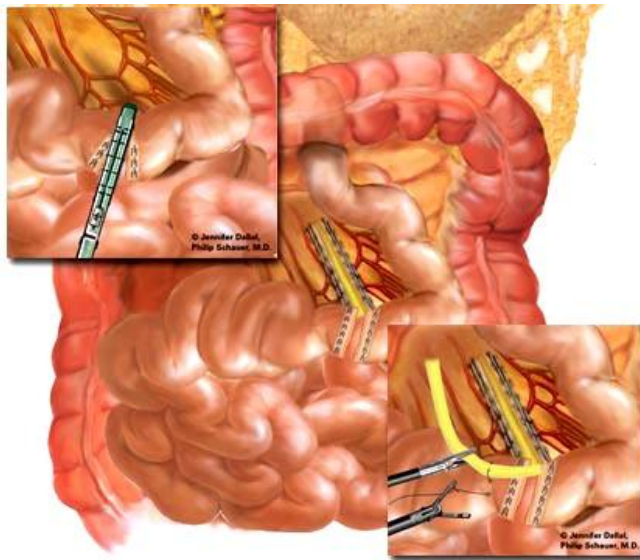


The stomach is sized to a small pouch by first identifying the esophago-gastric junction and then passing a Baker tube filled with 15 cc of saline solution. The Endo GIA stapler (US Surgical), 60 mm long with 4.8 mm staples is then fired three times

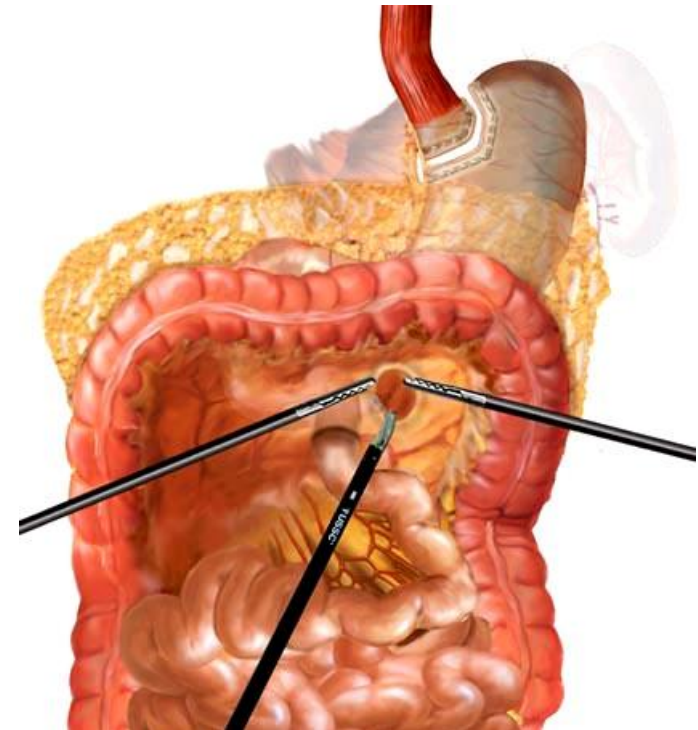
Laparoscopic Roux-en-Y Gastric Bypass



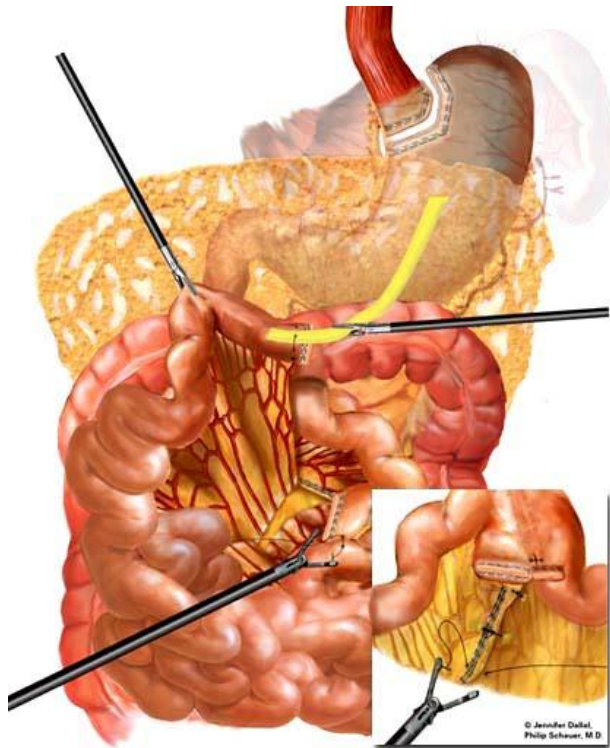
The patient is placed on the table and general anesthetics are administered. Trocars are placed as shown in this picture



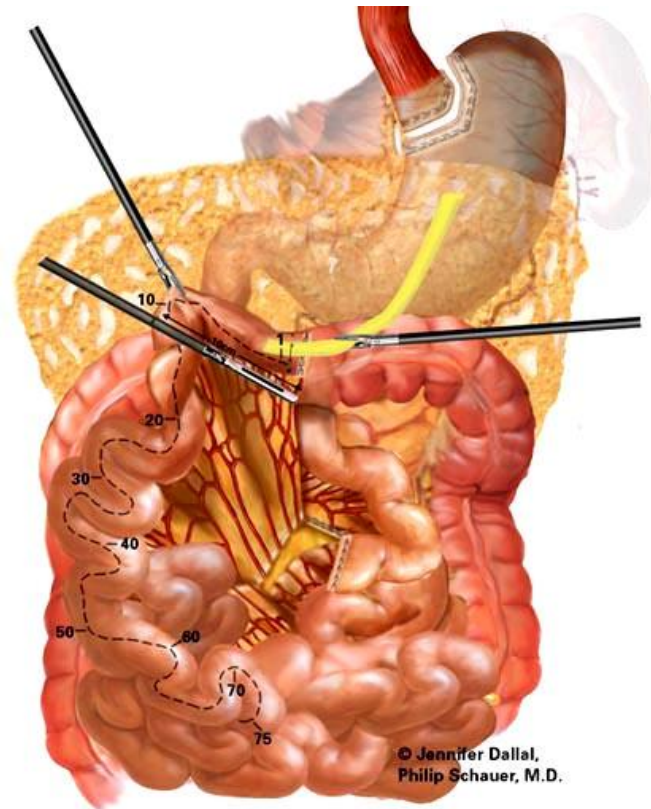
The jejunum is divided 15 cm beyond the ligament of Treitz ,by using an Endo GIA II stapler, 45 mm long with 3.5 mm staples. In addition the mesentery is also divided with a Endo GIA II stapler, but this time using the vascular load (45 mm length, 2.0 mm staples). A rubber drain is sutured



A retrogastric-retrocolic tunnel is performed in the mesocolon anterior and lateral to the ligament of Treitz. This "window" will facilitate the passage of the Roux-limb.

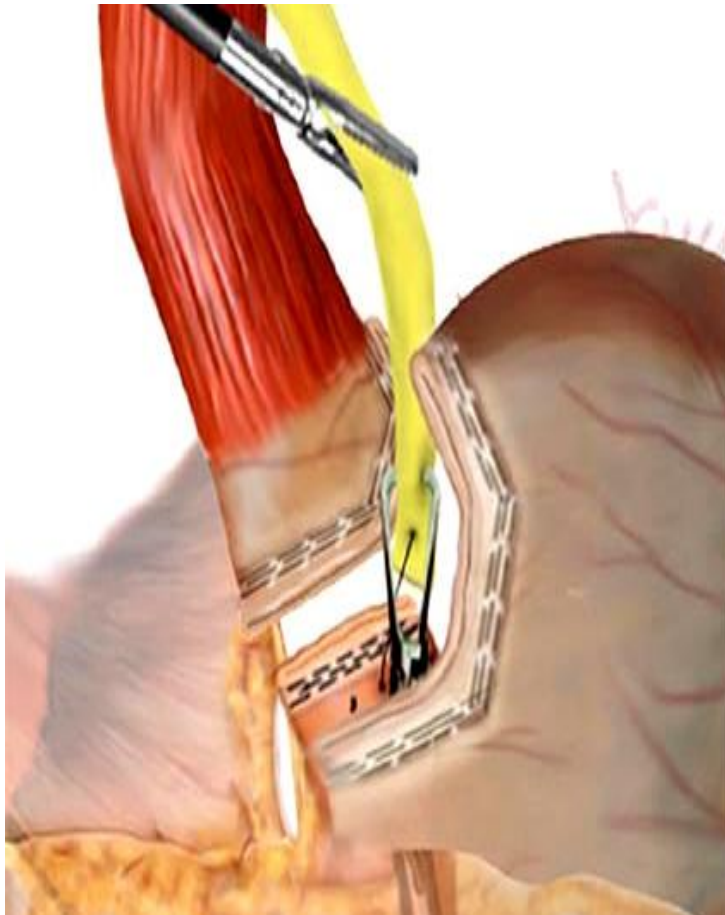


An end-to-side anastomosis between the proximal jejunum and the roux limb is created by firing two Endo GIA II staplers. The enterotomy is closed using another load of staples. The mesentery is also closed to prevent bowel entrapment (internal hernias).

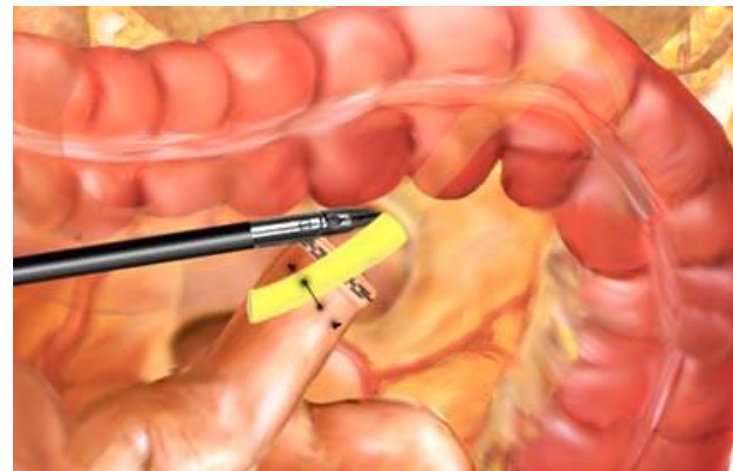


The Roux-limb is measured according to the patient BMI (Body Mass Index) and can range from 75 to 200 cm in length. Notice that the laparoscopic grasper is used as a rule

The Roux-limb is now advanced trough the mesocolic window



**Close up view of the
enteroenterostomy**



© Jennifer Dallal,
Philip Schauer, M.D.

Following an enterotomy an anastomosis between the gastric pouch and the Roux-limb is created by firing an Endo GIA II

<http://dratef.net/>

<http://dratefahmed.blogspot.com/>

<http://medical.shoppingdealer.com/>

<http://uptodate.dratef.net>

<http://scrub-shop.blogspot.com>

<http://tv.dratef.net/>

<http://books.dratef.net/>

<http://feeds.feedburner.com/Dratefnet>

<https://www.facebook.com/onlinemedicalbook/>

<https://www.facebook.com/onlineSurgicalbook/>

<https://twitter.com/DrATEFAHMED>

<https://twitter.com/medicalbook1>

<https://www.instagram.com/dr.atefahmed/>

<https://www.linkedin.com/in/dratef/>

<https://www.pinterest.com/shoppingdealer2/>

<http://feeds.feedburner.com/semnatv/wxHK>

<http://shoppingdealer.com/>

<http://ymarryme.com/>

<http://semnatv.com/>